



CHAGRIN FALLS EXEMPTED VILLAGE SCHOOLS

400 East Washington Street

Chagrin Falls, OH 44022

CLASSIFIED APPLICATION

NAME

POSITION DESIRED

DATE

**CERTIFICATION OR LICENSE INFORMATION
(CDL, AIDE CERTIFICATE, ASFS FOOD SERVICE CERTIFICATE, ETC.)**

Type _____

The candidate must include evidence of certification or license if applicable for the position sought

Please type or print all information

I. PERSONAL INFORMATION

Social Security Number _____

Name _____
Last First Middle

Street Address _____

City, State, Zip Code _____

Phone Numbers (Including Area Code) _____ Cell Phone _____

I WOULD LIKE TO BE CONSIDERED FOR:

Full Time _____ Part Time _____ Substitute _____

IN THE FOLLOWING AREAS:

Secretarial _____ Educational Aide _____ Food Service _____

Custodial _____ Bus Driver _____ Maintenance _____

OFFICE USE ONLY										
Application	Interview	BCI	FBI	Aide Cert.	CDL Bus Drivers	TB Test (Neg.)	Ref. Check Form	OAPSE Agreement	Hep B Letter	Bloodborne Pathogens

Date Received _____ Date Employed _____

Date Interviewed _____ For Position _____

Interviewers _____

D.O.T. _____

II. EDUCATION

High School Attended _____

Did you receive a High School Diploma Yes _____ No _____

College/University _____ Degree Granted/Date _____

Additional Training – List any additional training related to the position for which you are applying

III. REFERENCES – Include Principals, Superintendents, Supervisors or others for whom you have worked recently

Name _____ Position _____ Phone _____

IV. WORK EXPERIENCE (List current experience first)

From _____ To _____ Title of Position _____

Name and Address of Employer _____

Name and Phone Number of Supervisor _____

Final Salary _____ Reason for Leaving _____

From _____ To _____ Title of Position _____

Name and Address of Employer _____

Name and Phone Number of Supervisor _____

Final Salary _____ Reason for Leaving _____

From _____ To _____ Title of Position _____

Name and Address of Employer _____

Name and Phone Number of Supervisor _____

Final Salary _____ Reason for Leaving _____

Do we have your approval to contact your current employer? Yes _____ No _____

V. COMPLETE ONLY THE AREA BELOW IF IT APPLIES TO THE POSITION FOR WHICH YOU ARE APPLYING

Secretary/Aide – Check each category in which you have training or experience.

Library Clerical _____ Typing (words per minute) _____
Shorthand _____ Bookkeeping/Payroll _____
Educational Aide Permit _____

List any computer software program you have experience using _____

Bus Driver

Have you ever had a damage accident? _____

If yes, explain _____

Have you ever been cited for a traffic regulation violation? _____

If yes, explain _____

Food Service – Check each category in which you have training or experience.

Food Service Prep/Production _____ Cashier _____
Catering _____ Commercial Restaurant Equipment _____
Sanitation Certification _____

VI. OTHER CONSIDERATIONS

Have you ever worked for or applied for a position with the Chagrin Falls Exempted Village Schools before?

Yes _____ No _____ Dates of Application or Employment _____

If yes, under what name? _____

Have you ever been dismissed from or refused re-employment in a classified position?

Yes _____ No _____

Have you ever been convicted of any crime as an adult? Yes _____ No _____

If yes, explain: _____

**CHAGRIN FALLS EXEMPTED VILLAGE SCHOOLS
PRECONDITION TO EMPLOYMENT**

Should you come under final consideration for a position in the Chagrin Falls Exempted Village School District, Ohio Revised Code 3319.39 and Ohio House Bill 79 requires the District to conduct a criminal history record check and requires you to submit a set of electronic fingerprints to both the Bureau of Criminal Identification and Investigation and the Federal Bureau of Investigation. (Applicant is responsible for the cost of all background record checks.)

Have you every pled “guilty” or “no contest”, or been convicted of a misdemeanor or felony violation of the laws of Ohio, any other state, or the United States? Include any expunged pleas or convictions Answer by signing your name below at the appropriate answer. (If you answer is “Yes” this question, please explain on a separate sheet, each misdemeanor or felony plea or conviction, including, but not limited to, the nature of the offense, the date of the plea or conviction and the state or Federal court which entered the plea or conviction.)

Yes _____

No _____

READ CAREFULLY

Pursuant to the same Ohio Revised Code 3319.39, employment by any public or chartered non public school in the State of Ohio is conditioned on the applicant satisfactorily passing the BCI and FBI criminal history record checks. Due to the length of time required for completion of any required/requested records check, it may occasionally be necessary to employ a person prior to the Board of Education having received the results of the criminal records investigation. In these cases, the Board of Education shall rely on the applicant information provided in the employment application. However, by signing this document below, I specifically agree that if I am employed by the Board of Education prior to its receipt of a response from BCI/FBI, my employment shall be contingent upon subsequent receipt by the Board of Education of a report from BCI/FBI which is not inconsistent with my answer to the above question. In the event I have been employed prior to the Board of Education having received a report from BCI/FBI, and a subsequent report from BCI/FBI is received which is inconsistent with my answer to the above questions, I specifically agree that the action of the Board of Education employing me shall be void without any further act by either party, and that my employment will terminate immediately without the necessity of proceedings to formally terminate my contract of employment.

Signature _____

Date _____